

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

## Voter Education

ADDRESS (number and street)

1201 N. Orange St Ste 700 #7427

☐ Check if different than previously reported. (ACC)

Wilmington

DE

19801-1186

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00574681

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☒ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
01 01 2016

through

M M M / D D D / Y Y Y Y Y Y  
03 31 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Ann Mattson

Signature of Treasurer

Ann Mattson

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
04 14 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Voter Education

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
01 / 01 / 2016 To: M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2016</span>		<span style="border: 1px solid black; padding: 2px;">43381.87</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">43381.87</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">161807.55</span>	<span style="border: 1px solid black; padding: 2px;">161807.55</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">205189.42</span>	<span style="border: 1px solid black; padding: 2px;">205189.42</span>
7. Total Disbursements (from Line 31) .....	<span style="border: 1px solid black; padding: 2px;">126136.53</span>	<span style="border: 1px solid black; padding: 2px;">126136.53</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<span style="border: 1px solid black; padding: 2px;">79052.89</span>	<span style="border: 1px solid black; padding: 2px;">79052.89</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">36417.47</span>	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Voter Education

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
01		01		2016

To:

M M	/	D D	/	Y Y Y Y Y
03		31		2016

**I. Receipts**
**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

250.00

250.00

(ii) Unitemized .....

161557.55

161557.55

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ►

161807.55

161807.55

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ►

161807.55

161807.55

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ►

161807.55

161807.55

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ..... ►

161807.55

161807.55

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	126386.53	126386.53
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	126386.53	126386.53
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	-250.00	-250.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	126136.53	126136.53
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	126136.53	126136.53

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	161807.55	161807.55
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	161807.55	161807.55
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	126386.53	126386.53
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	126386.53	126386.53

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 23

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Voter Education**

Full Name (Last, First, Middle Initial)

**A. Laura A Fabbro**

Mailing Address 20 Moro Dr

City

Hamilton

State

NJ

Zip Code

08619

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Not provided

Occupation

Not provided

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 01 / 2016

**Transaction ID : SA11AI.43165**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

250.00

250.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

Voter Education

Full Name (Last, First, Middle Initial)

**A. Ignite Payments**

Mailing Address 4000 Coral Ridge Dr

City State Zip Code  
Coral Springs FL 33065
Purpose of Disbursement  
Credit card fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 31 2016

Transaction ID : SB21B.43176

Amount of Each Disbursement this Period

613.37

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Ignite Payments**

Mailing Address 4000 Coral Ridge Dr

City State Zip Code  
Coral Springs FL 33065
Purpose of Disbursement  
Credit card fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 29 2016

Transaction ID : SB21B.43177

Amount of Each Disbursement this Period

535.24

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Ignite Payments**

Mailing Address 4000 Coral Ridge Dr

City State Zip Code  
Coral Springs FL 33065
Purpose of Disbursement  
Credit card fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 31 2016

Transaction ID : SB21B.43178

Amount of Each Disbursement this Period

525.91

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1674.52

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

Voter Education

Full Name (Last, First, Middle Initial)

**A. National Capital Bank**

Mailing Address 316 Pennsylvania Ave SE

City Washington      State DC      Zip Code 20003

Purpose of Disbursement  
Bank charge

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01      11      2016
**Transaction ID : SB21B.43168**

Amount of Each Disbursement this Period

921.53

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. National Capital Bank**

Mailing Address 316 Pennsylvania Ave SE

City Washington      State DC      Zip Code 20003

Purpose of Disbursement  
Bank charge

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02      08      2016
**Transaction ID : SB21B.43171**

Amount of Each Disbursement this Period

853.06

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. National Capital Bank**

Mailing Address 316 Pennsylvania Ave SE

City Washington      State DC      Zip Code 20003

Purpose of Disbursement  
Bank charge

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03      07      2016
**Transaction ID : SB21B.43174**

Amount of Each Disbursement this Period

962.51

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2737.10



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b   ☐ 22   ☐ 23   ☐ 24   ☐ 25   ☐ 26  
☐ 27   ☐ 28a   ☐ 28b   ☐ 28c   ☐ 29   ☐ 30b

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NAME OF COMMITTEE (In Full)

Voter Education

Full Name (Last, First, Middle Initial)

**A. Pitney Bowes**

Mailing Address PO Box 371874

City Pittsburgh   State PA   Zip Code 15250-7874

Purpose of Disbursement  
Postage

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary   ☐ General  
☐ Other (specify) ▼

State:   District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01   22   2016

Transaction ID : SB21B.43146

Amount of Each Disbursement this Period

1750.92

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Pitney Bowes**

Mailing Address PO Box 371874

City Pittsburgh   State PA   Zip Code 15250-7874

Purpose of Disbursement  
Postage

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary   ☐ General  
☐ Other (specify) ▼

State:   District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02   23   2016

Transaction ID : SB21B.43148

Amount of Each Disbursement this Period

3242.28

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Pitney Bowes Presort Service, Inc**

Mailing Address PO Box 809369

City Chicago   State IL   Zip Code 60680-9369

Purpose of Disbursement  
Postage and direct mail services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary   ☐ General  
☐ Other (specify) ▼

State:   District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03   18   2016

Transaction ID : SB21B.43155

Amount of Each Disbursement this Period

676.80

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5670.00

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFH`G7 <98I @`CF`+H9A-N5HCB  
.

Form/Schedule: SB21B

Transaction ID : SB21B.43146

No portion of this expenditure was made on behalf of, or in opposition to, any specifically identified Federal candidate.  
This activity did not expressly advocate the election or defeat of any candidate for public office.

Form/Schedule: SB21B

Transaction ID: SB21B.43148

No portion of this expenditure was made on behalf of, or in opposition to, any specifically identified Federal candidate.  
This activity did not expressly advocate the election or defeat of any candidate for public office.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB  
.

Form/Schedule: SB21B  
Transaction ID : SB21B.43155

No portion of this expenditure was made on behalf of, or in opposition to, any specifically identified Federal candidate.  
This activity did not expressly advocate the election or defeat of any candidate for public office.

Form/Schedule:  
Transaction ID:

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

Voter Education

Full Name (Last, First, Middle Initial)

**A. Pitney Bowes Presort Service, Inc**

Mailing Address PO Box 809369

City Chicago      State IL      Zip Code 60680-9369

Purpose of Disbursement  
Postage and direct mail services

Candidate Name

Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03      31      2016
**Transaction ID : SB21B.43161**

Amount of Each Disbursement this Period

1360.39

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. RFP Services, LLC**

Mailing Address 615 S Dupont Highway

City Dover      State DE      Zip Code 19901

Purpose of Disbursement  
Direct mail services

Candidate Name

Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02      03      2016
**Transaction ID : SB21B.43149**

Amount of Each Disbursement this Period

1092.95

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. RFP Services, LLC**

Mailing Address 615 S Dupont Highway

City Dover      State DE      Zip Code 19901

Purpose of Disbursement  
Phone banks

Candidate Name

Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02      03      2016
**Transaction ID : SB21B.43150**

Amount of Each Disbursement this Period

38190.60

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

40643.94

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB  
.

Form/Schedule: SB21B  
Transaction ID : SB21B.43161

No portion of this expenditure was made on behalf of, or in opposition to, any specifically identified Federal candidate.  
This activity did not expressly advocate the election or defeat of any candidate for public office.

Form/Schedule: SB21B  
Transaction ID: SB21B.43149

No portion of this expenditure was made on behalf of, or in opposition to, any specifically identified Federal candidate.  
This activity did not expressly advocate the election or defeat of any candidate for public office.

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB  
.

Form/Schedule: SB21B  
Transaction ID : SB21B.43150

No portion of this expenditure was made on behalf of, or in opposition to, any specifically identified Federal candidate.  
This activity did not expressly advocate the election or defeat of any candidate for public office.

Form/Schedule:  
Transaction ID:

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

Voter Education

Full Name (Last, First, Middle Initial)

**A. RFP Services, LLC**

Mailing Address 615 S Dupont Highway

City Dover      State DE      Zip Code 19901

Purpose of Disbursement  
Phone banks

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02      25      2016
**Transaction ID : SB21B.43151**

Amount of Each Disbursement this Period

33667.20

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. RFP Services, LLC**

Mailing Address 615 S Dupont Highway

City Dover      State DE      Zip Code 19901

Purpose of Disbursement  
Direct mail services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02      25      2016
**Transaction ID : SB21B.43152**

Amount of Each Disbursement this Period

958.86

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. RFP Services, LLC**

Mailing Address 615 S Dupont Highway

City Dover      State DE      Zip Code 19901

Purpose of Disbursement  
Phone banks

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03      31      2016
**Transaction ID : SB21B.43157**

Amount of Each Disbursement this Period

37867.20

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

72493.26

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB  
.

Form/Schedule: SB21B

Transaction ID : SB21B.43151

No portion of this expenditure was made on behalf of, or in opposition to, any specifically identified Federal candidate.  
This activity did not expressly advocate the election or defeat of any candidate for public office.

Form/Schedule: SB21B

Transaction ID: SB21B.43152

No portion of this expenditure was made on behalf of, or in opposition to, any specifically identified Federal candidate.  
This activity did not expressly advocate the election or defeat of any candidate for public office.



: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB  
.

Form/Schedule: SB21B

Transaction ID : SB21B.43157

No portion of this expenditure was made on behalf of, or in opposition to, any specifically identified Federal candidate.  
This activity did not expressly advocate the election or defeat of any candidate for public office.

Form/Schedule:

Transaction ID:

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

## Voter Education

#### A. RFP Services, LLC

Mailing Address 615 S Dupont Highway

City	State	Zip Code
Dover	DE	19901

Purpose of Disbursement	Direct mail services
-------------------------	----------------------

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB21B.43158

Amount of Each Disbursement this Period

889.46

 Memo Item

Full Name (Last, First, Middle Initial)

## B. US Postal Service

Mailing Address 900 Brentwood Rd NE

City	State	Zip Code
Washington	DC	20066

Purpose of Disbursement	Postage

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

MM / DD / YYYY

Transaction ID : SB21B.43159

Amount of Each Disbursement this Period

217.60

Memo Item

Full Name (Last, First, Middle Initial)

### C. US Postal Service

Mailing Address 900 Brentwood Rd NE

City	State	Zip Code
Washington	DC	20066

Purpose of Disbursement	Postage

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB21B.43160

Amount of Each Disbursement this Period

1792.45

 Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2899.51

126118.33

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB  
.

Form/Schedule: SB21B  
Transaction ID : SB21B.43158

No portion of this expenditure was made on behalf of, or in opposition to, any specifically identified Federal candidate.  
This activity did not expressly advocate the election or defeat of any candidate for public office.

Form/Schedule: SB21B  
Transaction ID: SB21B.43159

No portion of this expenditure was made on behalf of, or in opposition to, any specifically identified Federal candidate.  
This activity did not expressly advocate the election or defeat of any candidate for public office.

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB  
.

Form/Schedule: SB21B  
Transaction ID : SB21B.43160

No portion of this expenditure was made on behalf of, or in opposition to, any specifically identified Federal candidate.  
This activity did not expressly advocate the election or defeat of any candidate for public office.

Form/Schedule:  
Transaction ID:

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 21 OF 23

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Voter Education

Full Name (Last, First, Middle Initial)

**A. Friends of Rich Nugent**

Mailing Address PO BOX 15668

City  
BROOKSVILLEState  
FLZip Code  
34604Purpose of Disbursement  
Return check from 12/14/15

Candidate Name

RICHARD NUGENT

Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: FL District: 11

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2016

Transaction ID : SB23.43179

Amount of Each Disbursement this Period

-250.00
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☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Disbursement this Period

--

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Disbursement this Period

--

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

-250.00
---------

-250.00
---------

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 22 OF 23

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

Voter Education

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

RFP Services, LLC

Nature of Debt (Purpose):

Direct mail services

Mailing Address 615 S Dupont Highway

City State

Dover

Zip Code

DE

19901

Outstanding Balance Beginning This Period

1092.95

Transaction ID : SD10.43023

Amount Incurred This Period

0.00

Payment This Period

1092.95

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

RFP Services, LLC

Nature of Debt (Purpose):

Phone banks

Mailing Address 615 S Dupont Highway

City State

Dover

Zip Code

DE

19901

Outstanding Balance Beginning This Period

38190.60

Transaction ID : SD10.43026

Amount Incurred This Period

0.00

Payment This Period

38190.60

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

RFP Services, LLC

Nature of Debt (Purpose):

Phone banks

Mailing Address 615 S Dupont Highway

City

Dover

State

DE

Zip Code

19901

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.43162

Amount Incurred This Period

35611.59

Payment This Period

0.00

Outstanding Balance at Close of This Period

35611.59

1) SUBTOTALS This Period This Page (optional)..... ►

35611.59

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ..... ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 23 OF 23

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

Voter Education

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

RFP Services, LLC

Nature of Debt (Purpose):

Direct mail services

Mailing Address 615 S Dupont Highway

City State

Zip Code

Dover

DE

19901

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.43163

Amount Incurred This Period

805.88

Payment This Period

0.00

Outstanding Balance at Close of This Period

805.88

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

805.88

2) **TOTALS** This Period (last page this line number only)..... ►

36417.47

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

36417.47